

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with City on There Chall as Planta Co.
Fill in Reporting Period dates: Beginning Date: 3	File with: City or Town Clerk or Election Commission 15-/ Ending Date: 5-2-//
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	☑ 30 day after election ☐ year-end report ☐ dissolution
Charles J. Roux Candidate Full Name (if applicable)	Committee to Elect Charles J. Roux
B OH Office Sought and District	Charles J. Poux Name of Committee Treasurer
213 PAHEN RJ. Toukshury, MA Residential Address	H3PAHEW PSTEERSTOWN, MA. Committee Mailing Address)
Telephone Number (optional): 578 858 0590	Telephone Number (optional): 978-858-05-90
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	1025.54
Line 2: Total receipts this period (page 3, line 11)	Ø = 8
Line 3: Subtotal (line 1 plus line 2)	
Line 4: Total expenditures this period (page 5, line	14) 14/4,60 AN 9: MAY -2 AN 9:
Line 5: Ending Balance (line 3 minus line 4)	208.94
Line 6: Total in-kind contributions this period (page	208.94 99. 37. 38. 38. 38. 38. 38. 38. 38. 38. 38. 38
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	3c BAUK
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best of ctivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind continuous activity of all persons acting under the authority or on behalf of this committee in acc	atributions and liabilities for this reporting period and represents the campaign
igned under the penalties of perjury:	(Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box o	nly)
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the beset activity, of all persons acting under the authority or on behalf of this committee in according to any liabilities nor made any expenditures on my behalf during this reporting per	dance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee OR Candidate with independent activity filing separ I certify that I have examined this report including attached schedules and it is, to the best finance activity, including contributions, loans, receipts, expenditures, disbursements, incampaign finance activity of all persons acting under the authority or on behalf of this co	st of my knowledge and belief, a true and complete statement of all campaign -kind contributions and liabilities for this reporting period and represents the

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)		
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TOTAL CONTROL OF THE PROPERTY		J Company of the Comp			
ne 9: Total Receipts	s over \$50 (or listed above)	Ø]			
ne 10: Total Receipt	ts \$50 and under* (not listed above)				
ne 11: TOTAL RE	CEIPTS IN THE PERIOD	9	← Enter on page 1, line 2		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)		
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			BOARD TEW		
			F REGISTAND F REGI		
	- man		9: 52		
ine 9: Total Receipts	s over \$50 (or listed above)	•			
ine 10: Total Receipt	s \$50 and under* (not listed above)				
	CEIPTS IN THE PERIOD		← Enter on page 1, line 2		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and a page number on each page.)

	To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
3-23-11	Tour Crier	croburn Ma	Adv.	50-	
3-18-11	TownCrer	WOODEN MA	ALV.	152.40	
3-29-11	Amerimail	W. Rending, MA	mailers	964.30	
4-1-11	CASH	213 PortuRd.	CO-Pee of Downts	250-	
	in the state of th				
				80 AR TE	
			·	OWN CLE OF REGI KSBURN	
				878ARS 978ARS 1 MA	
		Line 12: Total Expenditures over \$50 (or listed above)		1366.60	
Line 13: Total Expenditures \$50 and under* (not listed above)			50-		
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD				1416,60	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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